

08/29/00
JC914 U.S. PTO

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PTO/SB/05 (4/98)

Approved for use through 09/30/2000. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

| | |
|--|--|
| Attorney Docket No. | CHADHA 1-1-1 |
| First Inventor or Application Identifier | Mandeep Singh Chadha |
| Title | FILTER CIRCUIT FOR A BIT PUMP AND METHOD OF CONFIGURING THE SAME |
| Express Mail Label No. | EL05386688US |

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

- | | |
|--|---|
| <p>1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Specification [Total Pages 58] (preferred arrangement set forth below)</p> <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 7]</p> <p>4. Oath or Declaration [Total Pages]</p> <ul style="list-style-type: none"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b). | <p>5. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p> <p>6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies |
|--|---|

ACCOMPANYING APPLICATION PARTS

7. Assignment Papers (cover sheet & document(s))
8. 37 C.F.R. § 3.73(b) Statement Power of
(when there is an assignee) Attorney
9. English Translation Document (if applicable)
10. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS
Citations
11. Preliminary Amendment
12. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
13. Small Entity Statement(s) Statement filed in prior application,
(PTO/SB-09-12) Status still proper and desired
14. Certified Copy of Priority Document(s)
(if foreign priority is claimed)
15. Other:
.....
.....

***NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).**

16. If a CONTINUATING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

Continuation Divisional Continuation-in-part (CIP) of prior application No: _____

Prior application information: Examiner _____

Group / Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

| | | | | | |
|--|---|-----------|----------------|---|----------------|
| <input type="checkbox"/> Customer Number or Bar Code Label | (Insert Customer No. or Attach bar code label here) | | | or <input checked="" type="checkbox"/> Correspondence address below | |
| Name | Glenn W. Boisbrun | | | | |
| Address | Hitt Gaines & Boisbrun, P.C. | | | | |
| City | Richardson | State | Texas | Zip Code | 75083 |
| Country | | Telephone | (972) 480-8800 | Fax | (972) 480-8865 |

| | | | |
|-------------------|-------------------|-----------------------------------|------------|
| Name (Print/Type) | Glenn W. Boisbrun | Registration No. (Attorney/Agent) | 39,615 |
| Signature | | Date | 08/29/2000 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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FEE TRANSMITTAL

for FY 2000

Patent fees are subject to annual revision.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$)

912.00

Complete if Known

| | |
|----------------------|----------------------|
| Application Number | N/A |
| Filing Date | Herewith |
| First Named Inventor | Mandeep Singh Chadha |
| Examiner Name | N/A |
| Group / Art Unit | N/A |
| Attorney Docket No. | CHADHA 1-1-1-1 |

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 12-2325

Deposit Account Name Lucent Technologies

 Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17

2. Payment Enclosed:

 Check Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

| Fee Code (\$) | Fee Code (\$) | Fee Description | Fee Paid |
|---------------|---------------|------------------------|----------|
| 101 690 | 201 345 | Utility filing fee | 690.00 |
| 106 310 | 206 155 | Design filing fee | |
| 107 480 | 207 240 | Plant filing fee | |
| 108 690 | 208 345 | Reissue filing fee | |
| 114 150 | 214 75 | Provisional filing fee | |

SUBTOTAL (1) (\$)

690.00

2. EXTRA CLAIM FEES

| Total Claims | Extra Claims | Fee from below | Fee Paid |
|--------------------|--------------|----------------|----------|
| 28 | -20** = 8 | x 18.00 | = 144.00 |
| Independent Claims | 4 - 3** = 1 | x 78.00 | = 78.00 |
| Multiple Dependent | | | |

**or number previously paid, if greater; For Reissues, see below

Large Entity Small Entity

| Fee Code (\$) | Fee Code (\$) | Fee Description |
|---------------|---------------|--|
| 103 18 | 203 9 | Claims in excess of 20 |
| 102 78 | 202 39 | Independent claims in excess of 3 |
| 104 260 | 204 130 | Multiple dependent claim, if not paid |
| 109 78 | 209 39 | ** Reissue independent claims over original patent |
| 110 18 | 210 9 | ** Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2) (\$)

222.00

SUBTOTAL (3) (\$)

0.00

Reduced by Basic Filing Fee Paid

| SUBMITTED BY | | Complete (if applicable) | | |
|-------------------|-------------------|--------------------------------------|------------|--------------------------|
| Name (Print/Type) | Glenn W. Boisbrun | Registration No. (Attorney/Agent) | 39,615 | Telephone (972) 480-8800 |
| Signature | | Date | 08/29/2000 | |

WARNING:

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